

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>6/21/05</u>		2 Serial/Patent # <u>09/877,802</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
<input type="checkbox"/>	Filing		\$							
<input type="checkbox"/>	Amendment		\$							
<input type="checkbox"/>	Extension of Time		\$							
<input type="checkbox"/>	Notice of Appeal/Appeal		\$							
<input checked="" type="checkbox"/>	Petition		\$ 130							
<input type="checkbox"/>	Issue		\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$							
<input type="checkbox"/>	Maintenance		\$							
<input type="checkbox"/>	Assignment		\$							
<input type="checkbox"/>	Other		\$							
		7 TOTAL AMOUNT OF REFUND \$ <u>130</u>								
10 REASON:		8 TO BE REFUNDED BY:								
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Treasury Check							
<input type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:							
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>1</td><td>1</td><td>--</td><td>0</td><td>8</td><td>5</td><td>5</td> </tr> </table>		1	1	--	0	8	5	5
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<u>Pet not required.</u>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>E. Shirene Willis</u>		TITLE: <u>Pet Attorney</u>								
SIGNATURE: <u>E. Shirene Willis</u>		PHONE: <u>272-3230</u>								
OFFICE: <u>Office of Refunds</u>										

THIS SPACE RESERVED FOR FINANCE USE ONLY:										
APPROVED: <u>William Kelly</u>		DATE: <u>6/30/05</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**



Attorney Docket No: 19626-0112
(45454-259755)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
Reiko M. Nakamura)
) Art Unit: 1641
Serial No.: 09/877,802)
) Examiner: G. Gabel
Filed: June 6, 2001)
)
For: METHODS AND COMPOSITIONS FOR DETECTION)
AND DIAGNOSIS OF INFECTIOUS DISEASES)

PETITION TO ACCEPT PHOTOGRAPHS AS DRAWINGS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. 1.84(b), petition is hereby made to accept photographs in this application. Form PTO-2038 is enclosed herewith authorizing the charge of \$130 to cover the fee required under 37 C.F.R. 1.17(h).

The Commissioner is hereby authorized to charge any deficiencies or credit any overpayments to Deposit Account No. 11-0855.

Refund Ref: 0030023112
06/30/2005

Credit Card Refund Total: \$130.00

Am Exp.: XXXXXXXXXXXX2008

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1100 Peachtree Street, Suite 2800
Atlanta, Georgia 30309-4530
Telephone: (404) 815-6500
Attorney Docket No. 19626-0112 (45454-259755)

05/03/2005 YPOLITE1 00000048 09877802

02 FC:1464 130.00 OP

Respectfully submitted,

Sima Singadia Kulkarni
Sima Singadia Kulkarni
Reg. No. 43,732

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on April 28, 2005.

Sima Singadia Kulkarni
Sima Singadia Kulkarni - Reg. No. 43,732

ATLLIB02 182874.1

Adjustment date: 06/30/2005 AKELLEY
05/03/2005 YPOLITE1 00000048 09877802
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